

Erlanger Metabolic & Bariatric Surgery Center Patient Manual

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Welcome

We want to thank you for choosing Erlanger Metabolic & Bariatric Surgery Center and putting your confidence in our team. We know that education and instruction are vital for success and the staff at Erlanger Metabolic & Bariatric Surgery are here to help. Support will come in multiple forms including classroom education, individual instruction, and weekly support group meetings. We will celebrate all of your successes and help you through all of your struggles. We will teach you what you need to know, what to expect, and how to prepare and deal with the lifestyle changes.

You may have been on this journey for a long time and it is important to understand you are not alone. Most patients have struggled with their weight for many years and the decision to undergo surgery feels like a last chance at a healthy life. This part of the journey you are about to begin is not a quick fix, but a lifelong process. It is your journey to a healthier you. Bariatric surgery is not a “magic bullet” or an easy way out for weight loss; it takes effort and work on your part. The work does not end in the operating room, or when you walk out of the hospital, or even when all of your wounds have healed. It lasts well beyond the first post-operative year and continues for a lifetime. As the saying goes: “Welcome to the first day of the rest of your life!”.

Weight loss is not guaranteed through bariatric surgery. In order to lose weight after bariatric surgery it requires a commitment to a lifestyle change. This lifestyle change involves healthy eating, regular physical activity, daily vitamin and mineral supplementation, and long-term follow-up care. Regular attendance in bariatric support group meetings is also encouraged for additional support and up-to-date recommendations.

The Erlanger Metabolic & Bariatric Surgery team knows that bariatric surgery requires comprehensive education, instruction, and support. It is important to know what to expect and this manual is designed to help you become better prepared before, during, and after surgery. Our goal at Erlanger Metabolic & Bariatric Surgery Center is to make your journey a success and we are here to help you every step of the way!

The Erlanger Metabolic & Bariatric Surgery Center Staff

ABOUT OUR BARIATRIC SURGERY CENTER

Erlanger Metabolic & Bariatric Surgery Center is proud of our Center of Excellence designation as a



For more information about accreditation criteria for Bariatric Surgery Centers of Excellence in the American College of Surgeons (ACS) & American Society for Metabolic and Bariatric Surgery (ASMBS) Metabolic and Bariatric Surgery Accreditation and Quality Improvement program (MBSAQIP), visit <https://www.facs.org/quality-programs/mbsaqip>



Fully accredited since 2015

Bariatric Program Overview

We are excited to be a part of your weight loss journey. Evaluation and follow-up care provide by our interdisciplinary support team is an integral part of your long-term weight management success. To help you succeed we ask you to commit to our recommended program components as outlined below.

Pre-Operative Consultations:

- ❖ Surgical Procedure Education (Seminar)
- ❖ Insurance Review
- ❖ Surgical Consultation (Pre-Surgical Checklist)
- ❖ Nutrition Evaluation
- ❖ Psychological Evaluation
- ❖ Physical Therapy Evaluation if ordered by provider
- ❖ Second Visit with Surgeon

Pre-Operative Testing/Education:

- ❖ Medical Testing/Radiologic Exams (per surgeons requirements)
- ❖ Labs
- ❖ Nutrition Education (Nutrition & Weight Loss Class and Bariatric Surgery Prep Class)

Post-Operative Follow-up for the First Year:

- ❖ 1 Week
- ❖ 6 Weeks
- ❖ 3 Months
- ❖ 6 Months (fasting labs)
- ❖ 9 Months
- ❖ 1 Year (fasting labs)

Post-Operative Follow-up beyond Year One:

- ❖ 18 months (fasting labs)
- ❖ 2 Years (fasting labs)
- ❖ 30 Months (fasting labs)
- ❖ 3 Years (fasting labs)
- ❖ Yearly (fasting labs)

Support & Resources Before and After Surgery

Our Metabolic & Bariatric Surgery Center provides you with support both before and after surgery. Taking advantage of our weekly bariatric support group meetings and scheduling visits with our Registered Dietitian Nutritionist can help you to reach and achieve your weight loss goals.

Bariatric Support Group Meetings:

We offer bariatric support group meetings, available before and after surgery. These meetings are offered twice per month online on the second & fourth Mondays. If it falls on a holiday there will be no meeting. Meetings are led by various program staff, and focus on behaviors proven to best impact successful weight loss and long-term weight management. We offer a variety of topics discussed, food demonstrations, and guest speakers.

We know how challenging it is out there without the support of others in your shoes. Support group attendance is also tied closely to greater weight loss success and long-term weight management, which is why we offer these meetings at no charge.

*If Monday falls on a holiday, there will not be a support group.

Visits with our Registered Dietitian Nutritionist:

Our Registered Dietitian or Nutritionist sees our patients both before and after surgery. Additional appointments for support, outside of the recommended follow-ups post-surgery, can be scheduled by contacting the front office scheduler. (a visit fee may apply)

E-Newsletter:

Sign up for our Metabolic & Bariatric Surgery Center quarterly e-newsletter by emailing metabolicsurgery@erlanger.org.

Surgery Prerequisites

Check off items once completed.

3 to 6 Months Before Surgery:

- Stop the use of nicotine/tobacco products at least 3- preferably 6-months before surgery.
 - This includes cigarettes, cigars, pipe tobacco, e-cigs (even if no nicotine), and all smokeless tobacco products.
 - It is recommended to not restart the use of nicotine/tobacco products after surgery due to inadequate healing, ulcer formation, and increased risk of leak.
 - Nicotine levels may be tested monthly before surgery.

30 Days Before Surgery:

- Stop the use of hormones (estrogen, progesterone, and testosterone) and birth control pills 1-month before surgery.

2 Weeks Before Surgery:

- Stop all diet pills 2-weeks before surgery.

7 Days Before Surgery:

- Stop all Nonsteroidal Anti-Inflammatory Drugs (NSAIDS), steroids, and arthritis drugs 7 days before surgery.
 - Aspirin, Motrin, Advil, Ibuprofen, Aleve, Naproxyn, Celebrex, Meloxicam, Vioxx, Voltaren, Mobic and many others will be discontinued for life.
 - Consult your doctor if any other providers recommend NSAID's after surgery.
 - Acetaminophen, Tylenol, or prescription pain medications are usually tolerated after surgery.

Anytime Before Surgery:

- If taking a blood thinner, contact the prescribing doctor for instructions on how to discontinue.
- Bring a list of all prescription and non-prescription medications for review.
 - Extended release medications (ER/ER/XL) should be changed to immediate release.
 - Read labels and ask questions about your medications.
 - Most oral medications are tolerated after surgery.
 - Although not required, it may be more comfortable to use another form such as crushed, chewable, liquid, or ability to split a larger tablet.
- Patients must meet all surgical prerequisites as ordered by the surgeon.
 - Please refer to your patient checklist for your individual requirements.

Important Considerations Prior to Surgery

It is important to understand that metabolic surgery is not cosmetic surgery. There is no removal of adipose tissue (fat) at the time of surgery. Excess loose skin after surgery does occur.

Having the surgery alone will not provide appropriate weight loss benefit. While surgery is a very effective tool towards your weight loss and improved health goals; you must commit to long-term lifestyle changes in diet and exercise. The goal of metabolic surgery is to improve your health, provide a better quality of life, and weight loss.

Taking Control of Your Emotions

- ❖ Recovery from surgery is a psychological process as well as a physical one. The amount of weight you lose and maintain is related to how closely you follow the postoperative plan including follow up appointments with the surgeon, the bariatric team, and support groups. Successful weight loss surgery requires a lifetime commitment to lifestyle changes. Regular participation in the pre-and post-operative support system will help you to prepare for and recover from surgery. This will also assist you in achieving life-long success.
- ❖ Losing a substantial amount of weight is sometimes exhilarating. However, you may encounter changes in your self-image, emotional functioning, and intimate relationships that might not be comfortable. It is recommended that you keep a journal of your thoughts and feelings, to process with your support system.
- ❖ Obesity has often served as a defense mechanism for overweight people. When obsessive food intake is stopped, other addictive behaviors like shopping, drinking, drug use, or inappropriate sexual behavior could develop. It is important to replace the unhealthy coping skills with healthy coping skills.
- ❖ After surgery, think of food as a fuel, not a source of entertainment, drama, comfort, or a central focus of your life. Food is used by many people to deal with painful emotions such as anger, grief, anxiety, stress, and loneliness. Food is also used as a way of celebrating. You will no longer be able to rely on food for these purposes. Think fuel not meals.
- ❖ You will need to mourn the loss of your food in the same way you would mourn the loss of something or someone dear to you. Eventually, you will get to the point of acceptance. Look for other things to take the place of food. Post-operatively, you will begin to enjoy the socializing and ambiance of the dining experience more than the food itself. You are also likely to enjoy exercise for the first time in a long while.
- ❖ After years of being too hard on yourself, you will need to develop positive affirmations and self-talk to replace old negativity. When the positive self-talk is repeated often enough,

it becomes part of your belief system about yourself. Support group is a good place to work on this issue.

- ❖ Head/emotional hunger is the desire to eat but you are not physically in need of food. It can come from physiological triggers such as boredom, depression, stress, anxiety, loneliness etc. It can also come from environmental triggers such as restaurants, parties, people, holidays etc. Physical hunger is eating for the purpose of nourishing your body.
- ❖ All patients undergo a major change in their physical appearance. In turn, a personality change may be noticed. However, confusion about one's self image can occur, causing an identity crisis that can result in changes in significant relationships. It is also important to recognize that being more assertive and outspoken following weight loss is not a negative change. Increased self-confidence will benefit you once you have made an appropriate adjustment.
- ❖ Obesity is a disease of the body, mind and spirit. Please remember to consider all these factors when working with your goals to achieve life-long success.
- ❖ See pages 69 and 70 for when to seek behavioral health services after surgery.
- ❖ REMEMBER: EAT TO LIVE – NOT LIVE TO EAT

Getting Started: Path to Successful Weight Loss

Prior to surgery you may have a certain amount of weight to lose per your insurance or the surgeons' requirement. Weight loss prior to surgery helps to reduce abdominal fat near the surgery site and can improve surgical risk. The following strategies can help you with achieving weight loss before surgery, and teach you skills that will help with successful weight management long-term.

Pre-Surgery Weight Loss Strategies:

Track daily food intake.

- ❖ Use the simple pen and paper method, a tracking website, or even track from your smart-phone using a free app. Options include:
 - Myfitnesspal
 - Baritastic (bariatric surgery specific tracking program)
- ❖ Make sure to track everything that goes into your mouth.
- ❖ Set reminders on your phone or on your calendar to remind yourself to track throughout the day, this way you don't miss anything.
- ❖ Schedule time for your meals and allow no more than 4 ½ hours to pass between each meal.
 - If you feel like you need a snack between your meals, first drink 12 ounces of water or a calorie free beverage then wait 30 minutes. Thirst is often confused with hunger.

Fill half your plate with non-starchy vegetables.

- ❖ This not only helps to reduce your portions of foods that add up in calories quickly, it also makes sure you fill up on healthy and filling foods.
- ❖ Anchor your plate with non-starchy vegetables—start with the vegetables to leave less room for starches and proteins.
- ❖ Incorporate 20-30 grams of protein at each meal.
 - 8 grams of protein for every 100 calories.

Don't drink your calories.

- ❖ Choose zero calorie beverages when drinking fluids.
- ❖ Avoid sugar-sweetened beverages—juice, sports drinks, and soda.
- ❖ Add variety to water with low-calorie flavor packets or liquids.
 - Crystal light
 - True Lemon, etc.
- ❖ Limit the amount of alcohol (beer, wine, and liquor) that you drink.

- ❖ Aim for 64 oz. of fluid per day—the body/brain often confuses thirst for hunger.

Practice mindful eating.

- ❖ Mindful eating means eating with complete awareness. Being present in the moment allows you to enjoy your meal while making sure you are also listening to your internal cues.
 - Limit distractions—turn off the TV, don't play with your phone, and don't eat at your desk.
 - Give yourself 30-minutes for a meal, it takes your brain 20-minutes to register that you are satisfied.
 - Eat slowly; put your fork/spoon down between each bite, and pay attention to the flavors and textures you are enjoying.
 - Listen to your body and stop when you feel satisfied, the goal isn't to feel full.

Set up your environment for success.

- ❖ Weight loss is challenging enough, don't make it so you constantly have to rely on willpower and self-control.
- ❖ Remove tempting foods from the environments that you spend the most time: home, work, car, etc.
- ❖ If you live with others create your own cabinet with the foods that help support you, or create a cabinet for them and put the foods you should avoid in there.
- ❖ Keep healthy foods front and center—make sure the fruit basket is on the counter and filled, keep washed and prepared vegetables and fruit on the middle shelf in the fridge for ready-to-go snacks.

Get moving.

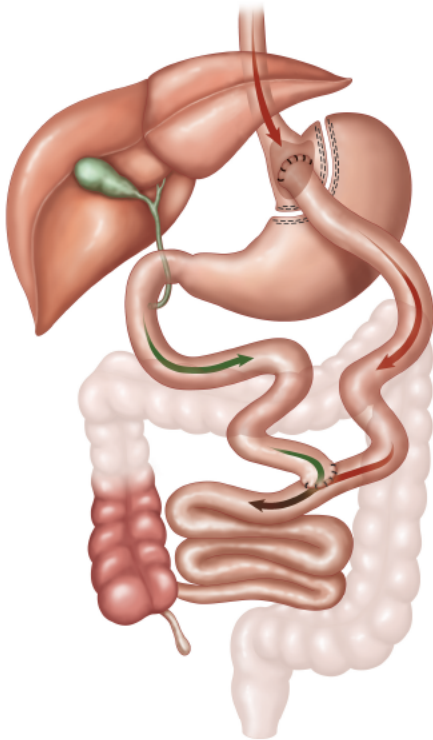
- ❖ Physical activity is a key strategy for weight management long-term and it can also help speed up your weight loss momentum.
- ❖ Aim for a minimum of 150 minutes/week of intentional activity (30 minutes, 5 days/week).
 - Activity can be completed in a continuous bout or split up into multiple bouts throughout the day.
- ❖ Resistance exercise builds muscle, and muscle burns calories.

Get adequate sleep.

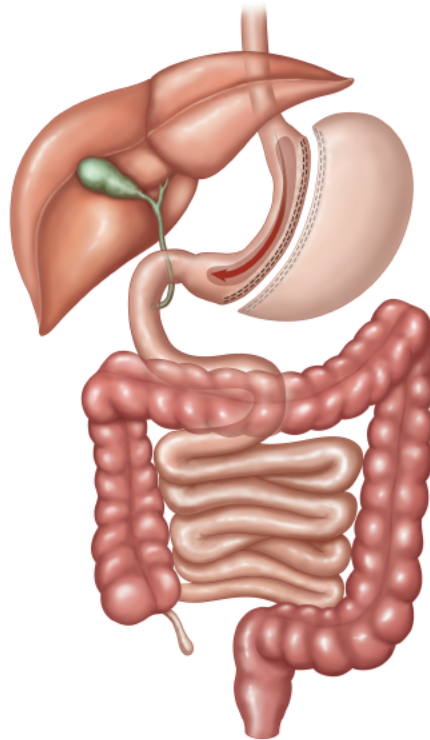
- ❖ Inadequate sleep can cause hormonal imbalances and lead to poor food choices.
- ❖ Start developing healthy bedtime behaviors and habits, such as drinking herbal teas, reading a special book, and not eating 2-hours prior to bedtime.
- ❖ Aim for 7-9 hours of sleep per night.

Pre-Operative Diet

Roux-en-Y
Gastric Bypass



Vertical Sleeve
Gastrectomy



Pre-Operative Diet: 2-Weeks Before Surgery

The goal of this diet is to shrink the size of your liver. During laparoscopic surgery, the liver is lifted out of the way to access the stomach below. If the liver is heavy, fatty, and immobile, it can be more challenging for the surgeon to see and gain access to the stomach. To reduce the size of the liver and further reduce complications, it is necessary to follow the eating plan outlined below.

If you have diabetes – please consult with your primary care physician before beginning this diet as some of your medications may need to be adjusted. Also, check your blood glucose levels more frequently to avoid hypoglycemia.

Foods and Beverages to be Eliminated 2-Weeks Before Surgery:

- ❖ Eliminate carbonated beverages prior to surgery.
 - These are also not recommended after surgery.
- ❖ Reduce caffeine intake before surgery.
 - It is important to become caffeine free by your surgery date.
 - No caffeine for 6-weeks post-surgery.
 - Caffeine is a vasoconstrictor that will inhibit healing and may cause marginal ulcers and gastric leaks.
 - Caffeine also reduces bone calcium.
- ❖ No snacking on gum, mints, or sugar-free candies, which can increase hunger.

2-Weeks Before Surgery

- ❖ 3 protein shakes and one healthy meal per day.
 - Protein shakes: see protein supplement guidelines on page 26.
 - No fruits blended into shakes.
 - Healthy Meal: 3-4 oz. of lean protein (see page 53 for ideas) and 2 cups of non-starchy vegetables (see page 55 for ideas).
 - No fried or breaded items.
 - No sauces or gravies on meat or vegetables.
 - No starchy vegetables or grains.
 - **or** a frozen portion controlled entree under 350 calories: Lean Cuisine, Weight-Watchers Smart Ones, Stouffer's FITKITCHEN, or Healthy Choice (**no pasta or rice-based dishes**).
- ❖ Aim for 64 ounces of clear, non-caloric beverages per day.

1-Week Before Surgery

- ❖ Full liquids: 4 protein shakes per day.
 - Omit the healthy meal and only drink your calories.
 - No fruits blended into shakes.
- ❖ Continue drinking 64 ounces of fluids per day.
 - It is important to stay hydrated.
- ❖ Low-sodium broth can reduce your feelings of hunger – try having a cup if you are feeling hungry.
- ❖ You can also use sugar-free popsicles or sugar-free Jell-O® gelatin, limit to no more than two per day.

Day Before Surgery

- ❖ Clear liquids only: these are fluids you can see through.
 - **Drink 24 to 36 ounces of Gatorade or Powerade (no G2, Gatorade Zero, or Powerade Zero)**
 - Water, low-sodium broth, decaf coffee or tea (no cream), sugar-free Jell-O® gelatin, sugar-free popsicles, flavored water.
- ❖ Stop all fluid and food intake at midnight.

Morning of Surgery

- ❖ No fluids or foods.
- ❖ If you have been instructed to take any medications before surgery, take them early or as soon as you awake on the day of surgery.
 - Take your medication with as little water as possible.

Pre-Operative Shopping List

Once you are discharged from the hospital you will probably not have the energy to go to the store and stock up on the items you will need post-op. It is recommended you get the following items in the house at least one-week prior to surgery.

Required:

- Clear Liquids
 - Water, clear-liquid protein supplements, low-sodium broth, decaf coffee or tea, sugar-free popsicles, sugar-free Jell-O[®] gelatin, flavored water
- Full Liquids
 - Protein shakes, protein powder, skim milk, thin cream soups, tomato juice, Carnation Instant Breakfast[®] light start, sugar-free hot cocoa mix
- Miralax
- Chewable/Liquid Multivitamin (200% of daily value/day)
- Chewable Calcium Citrate (1200-1500 mg/day)
- Vitamin B12 sublingual tablets/nasal spray/injection (500 mcg/day)

Recommended (items other patients have found useful):

- Measuring Cups
- Measuring Spoons
- Food Scale
- Smaller Plates (7- to 9-inches)
- Smaller Spoon/Fork
- Blender (capable of crushing ice for shakes)
- Protein Mixer Cup
- Single-Serving Storage Containers
- Breath Freshener (you may experience bad breath post-op)
 - Listerine Strips, GNC Breath Relief, Chlorophyll tablets, or Devrom pills

Surgery and Your Hospital Stay



Surgery and Your Hospital Stay

The Day of Surgery

Pre-testing will tell you what time to report to Surgical Services the morning of your surgery. Free valet parking is available outside of Surgical Services. Surgical Services has a waiting room available for family/friends and the surgeon will meet with them both before and after surgery. Your surgery will take approximately 1 ½ to 2 hours.

Do not wear make-up, jewelry, contacts, body piercings, or hair ties with metal. Bring your home medication list with you to confirm with the nurse. If you use a CPAP or BiPAP at home, please make sure you bring it with you.

In the Hospital

Following surgery your hospital room will be located on the 8th floor of the Northwest Wing. You should expect to be in the hospital a total of 1-2 nights following your surgery.

It is important to be up and walking as soon as possible following surgery. This helps prevent blood clots and pneumonia, and can also help the bowels to wake up after anesthesia.

You will have an incentive spirometer to help you take deep breaths. Please use this 3 times every 15 minutes while awake. Continue to use once you go home.



Immediately following surgery, you will be provided clear liquids in your hospital room. Your limit is 1 ounce of fluid every 30-45 minutes – wet your mouth, rest your stomach. The day after surgery you will be provided with clear liquid trays with a packet of UNJURY chicken soup. Remember to sip 1 ounce every 10-minutes or ½ ounce every 5-minutes.

Post-Operative Instructions



Post-Operative Instructions: When You Go Home

Post-op Care

- ❖ Stay hydrated.
 - Goal: 60-80 oz. of liquids daily.
 - Not getting your fluids in can easily land you back in the hospital and will make you feel sluggish and nauseated.
- ❖ Stay nourished.
 - Follow diet progression after bariatric surgery as outlined in this manual.
 - Keep a record/log of you food and liquid intake.
- ❖ Take daily nutritional supplements as outlined in this manual.
- ❖ Take deep breaths and use your incentive spirometer.
- ❖ Keep moving.
 - Get up and walk around the house as much as possible to prevent blood clots.
 - Begin walking program as soon as you can.
 - After the first two weeks, if no balance problems, you may walk on a treadmill, ride a stationary bicycle, or use an elliptical in moderation.
 - No weights or core exercises until after 6-weeks.
 - No water aerobics or swimming until incisions have healed and scabs have come off.

Incision Care

- ❖ Remove plastic and gauze dressing on 3rd day after surgery.
- ❖ Leave steri-strips in place until seen in office.
- ❖ If dressing saturates with blood or fluid:
 - Remove dressing and clean with mild soap and water, if needed, dry thoroughly.
 - Re-dress with dry gauze and tape. No creams, ointments, or hydrogen peroxide on incisions.
 - Repeat until no more drainage.
- ❖ It is ok to shower once at home.
 - No bath, pool, etc. for 2-weeks (until scabs on incisions fall off).

Medications

- ❖ The surgeon will mark on your charts which of your home meds they want you to continue at the time of your discharge from the hospital – Discharge Medicines Sheet.
- ❖ Use as little of the narcotic as possible to prevent constipation.
 - Tylenol is best for mild-moderate pain.

- ❖ Be sure to stay on your acid blocker medication for at least the first 30 days to assist healing of the stomach.
- ❖ If diabetic: follow and record blood sugars and adjust meds with primary care provider as needed.
- ❖ If hypertensive: follow and record blood pressure and adjust meds with primary care provider as needed.
- ❖ Do not discontinue medications without your physicians' involvement.
- ❖ Recommend you start Miralax once a day to prevent severe constipation.

Call office at (423)778-2906 immediately for:

- ❖ **Sudden onset of chest pain and shortness of breath – CALL 911**
- ❖ Fever 101 or greater
- ❖ Heart rate greater than 120 beats per minute at rest
- ❖ Shortness of breath at rest, or difficulty taking a deep breath
- ❖ Severe abdominal pain (may radiate to back or shoulders)
- ❖ Vomiting blood or passing blood in stool
- ❖ Any signs of infection from incisions

Keep all of your follow-up appointments

- ❖ Call our office at (423)778-2906 to make your follow-up appointments.
- ❖ Post-op follow-up appointment schedule: 1 week, 6 weeks, 3 months, 6 months, 9 months, 1 year, 18 months, 2 years, 30 months, 3 years, and yearly thereafter.
- ❖ Yearly after 3 year appointment.
- ❖ Remember, we will need to check labs at some of your follow-up appointments to ensure your best health and nutritional status.

Nutritional Supplements



Nutritional Supplements After Bariatric Surgery

There are specific nutritional supplements that must be taken daily and for life due to the decreased absorption of vitamins and minerals post-surgery. Some individuals need to take additional vitamins/minerals, as directed by your healthcare team, outside of those required due to additional deficiencies post-surgery. These nutritional supplements are essential and will promote proper healing and long-term health. While specific recommendations can vary to accommodate each patient's needs, the following are some general guidelines for post-surgery patients.

Required Nutritional Supplements:

❖ **Multivitamin (MVI): 200% of daily value**

- Bariatric specific multivitamins are based on 200% of daily value (DV), take as directed.
- If choosing a standard over-the-counter multivitamin-multimineral supplement make sure that includes 100% of the daily value (DV) for vitamin K, biotin, zinc, thiamin, folic acid, iron, and copper; double the serving size.
 - Choose a complete formula.
- Chewable form for the first 6-weeks after surgery.
 - **Avoid gummy multivitamins** that are not a complete vitamin as well as vitamin patches.

❖ **Calcium Citrate: 1200-1500 mg/day**

- Calcium can be found in multiple forms, make sure to choose the citrate form which is best absorbed.
- You cannot absorb more than 600 mg of calcium at a time, split in divided doses of 500-600 mg for maximum absorption.
- Calcium and iron should be taken 2 hours apart.
- Chewable form for the first 6-weeks after surgery.

❖ **Vitamin B12:**

- Sublingual (under the tongue tablets or drops): 500 mcg/day
- Nasal Spray (Nascobol): 500 mcg/week
- Intramuscular Shot: 1,000 mcg/month

Situational Nutritional Supplements:

❖ **Iron: 45-65 mg every other day** (ferrous fumarate or ferrous gluconate)

- For anemia or menstruating women.
- Calcium and iron should be taken 2 hours apart.

❖ **Vitamin D3: 3000 IU/day**

- May need if vitamin D levels are low.
- Helps with calcium absorption.

May Find Helpful Nutritional Supplements:

- ❖ **Biotin: 500-1000 mcg/day**
 - For hair loss.
- ❖ **Probiotic: >4 billion colonies daily** (lactobacillus)
 - May be helpful for constipation and diarrhea.
- ❖ **B50 Complex: 1 serving/day**
 - May provide additional support against B-vitamin deficiencies.

Bariatric Specific Nutritional Supplement Brands:

- ❖ Bariatric Fusion
- ❖ Bariatric Advantage
- ❖ Celebrate
- ❖ Optisource
- ❖ Opurity
- ❖ Nascobol (nasal spray B12 prescription) → ask for a prescription through our office

Important Points to Remember:

- Start taking required multivitamins the day you get home from the hospital.
- Avoid gummy multivitamins; they are not complete supplements and can lead to deficiency.
- You can take pills or capsules as long as they do not cause stomach discomfort.
- Skipping your nutritional supplements can cause serious, irreversible health problems along with inadequate weight loss.
- It is important to keep all of your follow-up visits post-surgery to continue to monitor nutrition levels.

Websites to purchase bariatric nutritional supplements:

www.bariatricadvantage.com

www.celebratevitamins.com

www.opurity.com

www.bariatricfusion.com

www.bariatricchoice.com

www.bariatastic.com

A New Way of Eating



A New Way of Eating

After bariatric surgery it is necessary to learn a new way of eating to help you succeed in meeting your goals long-term. Taking time to learn healthy post-surgery eating strategies will help you avoid becoming nauseous or malnourished, and will help you progress towards your weight loss goals.

General Eating Guidelines

After bariatric surgery you should follow a few basic rules for eating:

1. **Eat three meals each day** and avoid snacking when bored, upset, etc. If you are physically hungry between meals, try to drink a non-calorie beverage first; it is often thirst that feels like hunger. If 30 mins later you are still hungry, focus on high protein snacks or non-starchy vegetables.
2. **Know your food groups** and understand which food items fall into which category. It's important to know the difference between proteins, carbohydrates, and fats to identify what to get in at each meal.
3. **Each meal should take 20 to 30 minutes to eat.** This helps you to practice mindful eating and makes it less taxing on your newly formed stomach pouch. Take small bites and chew each one 20 to 30 times. Put down your fork/spoon in between each bite and enjoy the flavors and textures you are tasting. No more rushed meals in front of the television or in the car.
4. **Make sure your food is moist,** this allows the food to be easily swallowed and pass through the stomach pouch and intestines smoothly. Use low-calorie condiments to add moisture to foods. Do not drink liquids with or 30-minutes after meals. Water and other fluids can fill you up, preventing you from getting the nutrients you need from food.
5. **Stop when you have had the recommended portions.** Your goal at the end of each meal is to feel satisfied, not full or stuffed. It takes up to 20 minutes for your stomach to signal to your brain that you are full. Eating slowly and eating to recommended portion size allows you to identify when you are satisfied and avoid overeating.

Food Groups

Foods are composed of three major food groups: protein, carbohydrates, and fat. The following guidelines review how to incorporate these food groups to ensure adequate nutrient intake and help you to achieve your weight loss goal.

Protein

The most important nutrient after bariatric surgery is protein. Protein helps build muscle, fight infection, and heal wounds. After bariatric surgery it is important that you meet your protein goals to avoid becoming malnourished. Protein deficiency can lead to risk of infection, hair loss, and muscle mass loss.

Protein Goal = 60 to 80 grams per day

Protein Sources well tolerated after surgery:

- Meat: lean meats like chicken (especially thighs), lean ground meats, turkey, eggs, ham, lean beef, bison and veal.
- Seafood: cod, tilapia, steamed crab and lobster, flounder, halibut, salmon, swordfish, and canned tuna.
- Dairy: cottage cheese, low-fat milk, low-fat cheese, mozzarella cheese, ricotta cheese, and artificially sweetened low-fat yogurt or greek yogurt.
- Beans/Legumes: kidney beans, black beans, pinto beans, chickpeas, lentils, and powdered peanut butter.
- Soy products: tofu, tempeh, soy milk, soy burgers, soy nuts, and edamame.
- Protein supplements (see next page): these are also useful to help you meet your protein goals while maintaining a low-calorie diet.

Protein Sources not well tolerated after surgery:

- Meat: dry or overcooked meats, fried meats, high-fat cuts of beef (t-bone, ribeye), high-fat ground meats, salami, sausage, and bacon.
- Dairy: whole milk, original high-sugar yogurt, heavy cream, and high-fat cheese.

Protein Supplement Guidelines: Shakes/Powders

There are multiple ready-to-drink shakes and protein powders to choose from following bariatric surgery. These products can be found at nutrition shops, pharmacies, Wal-Mart, Target, Walgreens, Rite-Aid, grocery stores, and online. When purchasing these products it is important to read the nutrition labels carefully to avoid products high in sugar and calories. Also, avoid products that add other supplements for muscle building, such as, creatine. Below is a list of guidelines to use when purchasing protein supplements.

Protein Supplement Guidelines:

- ❖ Less than 200 calories per serving
- ❖ 15-30 grams of protein per serving
- ❖ Less than 15 grams of sugar serving
- ❖ Protein source should be from whey, egg white, casein, milk, or soy* (found at top of ingredient list).

Look for:

- **Isolates**: The isolate forms of the protein source are preferred due to the higher amount of digestible protein and they are lactose free. (Example: whey isolate)
- **Concentrates**: The concentrate forms of the protein source contain a lower amount of digestible protein and they contain lactose. These can be used but should not be your only protein source throughout the day. (Example: whey concentrate)
- Avoid products with **collagen** and **gelatin** as protein source. These protein sources lack some essential nutrients and are not recommended for weight loss.

Ways to add variety to your shakes:

- ❖ Add 1 tablespoon (dry) sugar-free pudding powder.
- ❖ Add 1 tablespoon sugar-free flavored syrup (Torani, DaVinci).
- ❖ Add a packet of crystal light to water and mix with protein powder.
- ❖ Use a calorie-free flavored water or decaf coffee as the base.
- ❖ Make your chocolate shake warm to create a hot chocolate.
 - Reminder: do not heat protein powder above 140 degrees.

*For patients with a whey allergy, protein shakes are available made from rice, egg, soy, and pea protein.

Protein Supplement Examples

When purchasing protein supplements they come in both ready-to-drink and powder forms. Purchasing the powder is generally cheaper and can add up to be a cost saver. The following list provides examples of supplements that meet the guidelines post-surgery; it is not a complete list. If you have any questions regarding a protein supplement that is not on this list, please bring it in with the nutrition facts label for review.

Ready-to-Drink Protein Shakes:

- ❖ Ensure HP (high protein)
- ❖ Boost Glucose Control
- ❖ Glucerna Hunger Smart
- ❖ Optisource very high protein drink
- ❖ Muscle Milk Light
- ❖ Premier Protein Shakes, Premier Protein with Oats
- ❖ Equate High Protein Nutritional Shake
- ❖ Fair Life Core Power or Core Power Elite
- ❖ Atkins Shakes
- ❖ EAS AdvantEdge Carb Control
- ❖ EAS Myoplex Lite Shakes
- ❖ Isopure Smoothies
- ❖ GNC Lean Shakes
- ❖ Designer Whey Shakes
- ❖ SlimFast Advanced Nutrition High Protein

Protein Powders:

- ❖ Bariatric Advantage High Protein Meal Replacement Shake Mix and High Protein Shake Mix
- ❖ Bariatric Fusion Protein Powder
- ❖ Celebrate Meal Replacement Shake Mix and Protein Shake Mix
- ❖ UNJURY Protein Powder
- ❖ Nectar Protein Powder
- ❖ Smart Smoothies
- ❖ Pure Protein Powder
- ❖ Isopure Protein Powder
- ❖ Muscle Milk Light Powder
- ❖ Orgain Organic Protein
- ❖ Designer Whey Powder
- ❖ Body Fortress Whey Protein Powder
- ❖ Beneprotein unflavored Protein Powder

Websites to purchase protein supplements:

www.bariatricadvantage.com
www.nestlenutritionstore.com
www.unjury.com
www.bariatricfusion.com
www.celebratevitamins.com
www.bariatricchoice.com

What to mix protein powders with:

- ❖ Water
- ❖ Unsweetened Almond Milk
- ❖ Fairlife Skim Milk
- ❖ Skim/Fat Free Milk
- ❖ Lactaid Fat Free Milk
- ❖ Light Soy Milk
- ❖ Unsweetened Coconut Milk

Protein Shakes/Powders to Avoid:

- ❖ Ensure Original and Plus Nutrition Shake
 - ❖ Equate Nutritional Shake and Nutritional Shake Plus
 - ❖ Equate Weight Loss Shake
 - ❖ SlimFast Original
 - ❖ Carnation Instant Breakfast Original
-
- Shakes containing adequate amount of carbohydrates: Ensure High Protein, Boost Glucose Control, Glucerna Hunger Smart, Equate High Protein Nutritional Shake, GNC Total Lean Shakes, among others.
 - Powders containing adequate amount of carbohydrates: Bariatric Advantage High Protein Meal Replacement, Bariatric Fusion High Protein Meal Replacement, Celebrate Meal Replacement Shakes, to name a few.

Carbohydrates

Carbohydrates (carbs) are one of the primary energy sources for our bodies. While carbohydrate foods are a major energy source and can provide valuable nutrients, you will need to limit the number and types of carbohydrates you eat after bariatric surgery because:

- ❖ Eating too many carbs can lead to weight gain. If we eat more carbs than we can use for energy, our bodies store them as fat and we gain weight.
- ❖ Carbs can take up space needed for high-protein foods. Protein will be the most important nutrient after bariatric surgery, so you will need to eat protein first to ensure that your limited stomach capacity doesn't fill up before you have eaten enough.
- ❖ High-sugar foods can cause gas, slower weight loss, and dumping syndrome.

Carbohydrates come in two varieties: simple and complex. Simple carbohydrates include table sugar, syrup, candy, white flour, white rice, white pasta, breadcrumbs, and alcohol. Complex carbohydrates include starchy vegetables, fruits, beans/legumes, and whole grains. To meet your carbohydrate goal after surgery, you will need to find low-carbohydrate foods and choose the healthiest varieties from complex sources. Simple carbohydrate sources should be avoided. Best to choose complex carbohydrates to meet your needs.

Carbohydrate Goal = 60 to 80 grams per day the first 4-6 weeks post op.

- After the first 6-weeks, this can be decreased to **less than 60 grams per day.**
- Remember the goal is to focus on healthy complex carbs.

Complex Carbohydrate Sources well tolerated after surgery:

- Vegetables: non-starchy and starchy fresh, frozen, or canned vegetables (without oils, butter, or sauces).
- Fruits: fresh, frozen, or canned (no added sugar).
- Whole Grains: quinoa, bulgur, barley, buckwheat kasha, farro, museli, steel cut oats, all bran, oat bran, buckwheat oats.

Carbohydrate Sources that can slow down weight loss:

- Starchy vegetables: white potatoes.
- Whole Grains: grits, cream of wheat, rolled oats, Wasa whole grain crackers, Kashi 7 grain crackers, Kavli crispbread thins, brown rice, wild rice, whole wheat pasta, couscous, sandwich

thins, Flatout bread, low-carb tortillas, low-calorie whole wheat bread.

Simple Carbohydrate Sources that can stall weight loss/cause weight gain:

- Starches: white bread, white rice, white pasta, breadcrumbs, chips, crackers, pretzels, and pastries.
- Sugars: table sugar, honey, agave, syrups, ice cream, cakes, cookies, candy, and alcohol.

Fat

There are several types of fats that play a role in healthy eating after bariatric surgery. Because they are generally so common in our diets, limiting consumption is recommended. Fats are necessary for a variety of bodily functions, including energy production, nerve protection, and brain and lung function. It is impossible to completely eliminate fat from the diet because it is found in many different foods. After bariatric surgery you will need to understand which fats to avoid and how to eat good fats in moderation.

Fat Goal = no fat goal, focus on healthy fats in moderation

Healthy Fats consumed in moderation:

- Monounsaturated fats: avocado, tree nuts, and olive and canola oil.
- Polyunsaturated fats: fish, walnuts, and sunflower, corn, soybean, and flaxseed oils.

Fats to be limited:

- Saturated fats: poultry, seafood, meats, and low-fat cheeses.

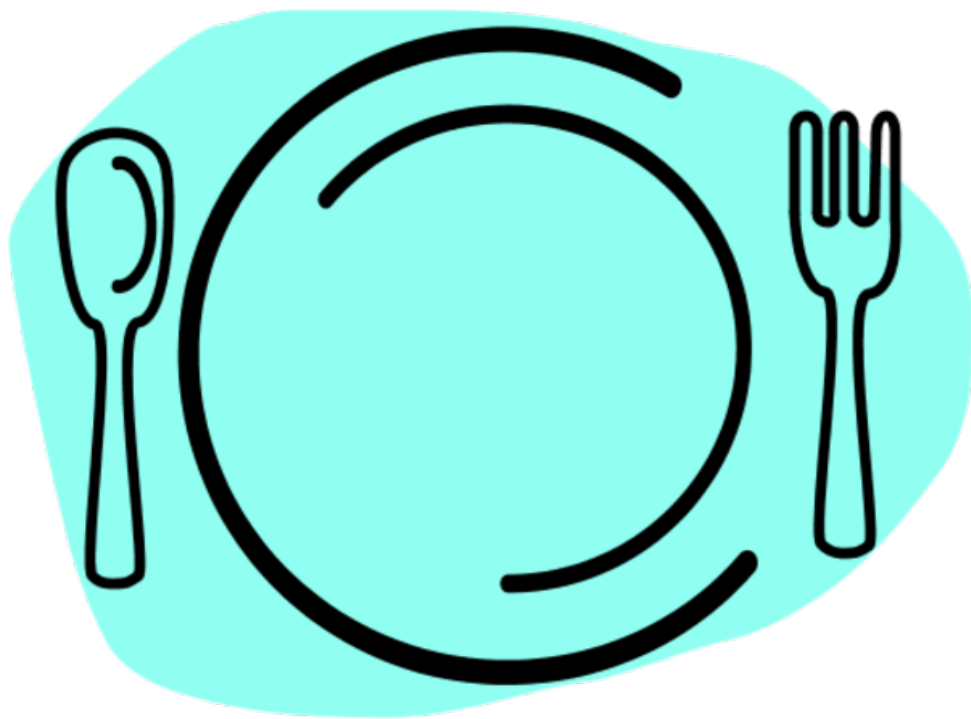
Unhealthy Fats to avoid:

- Saturated fats: high-fat cheeses, creams, butter, and coconut and palm oil.
- Trans fats: partially hydrogenated vegetable oils found in fried foods and baked goods.

Tips for reducing fat intake:

- ❖ Remove any visible fat from meats.
- ❖ Use non-stick sprays or broth to cook with versus oil or butter.
- ❖ Practice healthy cooking methods: baking, broiling, roasting, grilling, and steaming.
- ❖ Avoid excess condiment use, limit to serving size.
- ❖ Choose items low in fat: less than 5 grams per serving.

Diet Progression After Bariatric Surgery



Diet Progression After Bariatric Surgery

Below you will find an overview of the progression of your diet following bariatric surgery. Your newly formed pouch and connections created by the surgery require time to heal and adjust. The following guidelines allow this process to occur without adding stress on these areas. Following these guidelines will help you heal from surgery, improve your tolerance to food, promote healthy eating habits, and support weight loss.

It is important that you are meeting your fluid and nutrient goals as soon as possible post-surgery. To help you meet those goals it is recommended you track your daily fluid and protein intake.

Enhanced Clear Liquids (Days 1-3)

The day after surgery, you will be started on an enhanced clear liquid diet – these are liquids you can see through plus Ensure High Protein. The main purpose of the enhanced clear liquid diet is to provide adequate fluids to prevent dehydration while the digestive system recovers from surgery.

Full Liquids (Days 4-14)

Full liquids – liquids which you cannot see through – are started once the digestive system is recovered from the effects of surgery. The purpose of the full liquid diet is to continue to prevent dehydration while providing nutrition to promote recovery and healing.

Pureed Foods (Days 15-21)

It takes approximately 4-6 weeks for the suture lines to heal following surgery. The pureed food diet allows you to start introducing foods that are easily tolerated and provide adequate nutrition for healing.

Soft Foods (Week 3 – Week 7)

While the suture line continues to heal you will then transition to soft, semi-solid protein sources that are easily tolerated and will not place stress on the new stomach. This is also the time to learn what “full” is.

Regular Solid Foods (Week 7–Lifelong)

At this transition your stomach has now healed to the point where it can be used in the capacity of a weight loss tool. You will continue to introduce healthy nutritious foods as tolerated. It is recommended you consume three small meals per day, and avoid snacking.

Enhanced Clear Liquids: Days 1-3



Enhanced Clear Liquids: Days 1-3

The day after surgery, you will be started on an enhanced clear liquid diet – these are liquids you can see through plus Ensure High Protein. This diet is used initially following bariatric surgery, as it requires minimal digestion and ensures adequate hydration.

- ❖ Clear liquids are liquids that you can see through.
- ❖ These liquids are caffeine-free, low in sugar and calories, and not carbonated.
- ❖ Ensure High Protein will help you meet your protein needs. This has a few more carbohydrates than other protein shakes yet not so many to increase your risk of dumping.

Protein Goal: 40 grams per day

Carbohydrate Goal: 60 to 80 grams per day

Fluid Goal: 60 to 80 ounces of clear liquids per day

- Sip, sip, sip!
- 1 ounce every 10-minutes or ½ ounce every 5-minutes.
- A good measuring tool is the 1 oz. measuring cup that comes with a bottle of liquid medicine.
- Add one serving of Miralax into a glass of water daily.
- Avoid gulping fluids.
- No straws.

Clear Liquid Examples:

- Clear liquid protein supplements (see next page)
- Sugar-free powdered drink mixes or drops: Crystal Light, Mio, etc.
- Gatorade® low-calorie G2
- V-8 splash diet or Ocean Spray diet (all juices must be diluted with 50% water/50% juice)
- Diluted apple juice (must be diluted with 50% water/50% juice)
- Sugar-free Tang, sugar-free Snapple
- Sugar-free popsicles
- Sugar-free gelatin (Jell-O®)

Clear Liquids Sample Day:

8 oz. high-protein, low-sugar clear liquid protein drink	20 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein chicken soup (half of packet)	10 gm
8 oz. 50% apple juice + 50% water	0 gm
12 oz. water	0 gm

4 oz. high-protein chicken soup (half of packet)	10 gm
16 oz. water	0 gm
64 Total ounces Liquid	40 grams Total Protein

Clear Liquid Protein Supplement Options

- ❖ UNJURY unflavored protein powder (mixed with clear liquid beverage)
- ❖ UNJURY chicken soup flavor (mixed with warm water)
- ❖ UNJURY strawberry sorbet flavor (mixed with clear liquid beverage)
- ❖ Bariatric Fusion chicken soup (mixed with warm water)
- ❖ Bariatric Fusion unflavored protein powder (mixed with clear liquid beverage)
- ❖ Premier Protein Clear Protein Drink
- ❖ Atkins Lift Protein Drink
- ❖ Nature's Best Isopure Zero Carb
- ❖ Protein₂O Water
- ❖ Beneprotein unflavored protein powder (mixed with clear liquid beverage)

Ways to Add Carbohydrates

At times you may find it difficult to consume adequate amounts of carbohydrates while on clear liquids. To prevent ketosis, we recommend the following:

- Dilute fruit juice – apple, cranberry, grape, V-8 Splash or Ocean Spray juice and dilute with 50% water (example: use 4 oz juice with 4 oz water and mix). **Do not use orange juice, as it is too acidic and may cause reflux symptoms.**
- Use Gatorade® low-calorie G2, it is not necessary to dilute with water.

Full Liquids: Days 4-14



Full Liquids: Days 4-14

The full liquid diet is used after surgery as a transition between clear liquids to solid foods. The full liquid diet provides more nutrition and protein than the clear liquid diet while still allowing your stomach to heal. Introduction of foods beyond full liquids, at this stage, could slow the healing process.

- ❖ Full liquids are slightly thicker, cannot see through.
- ❖ If clear liquids are well tolerated, the nurse might transition you to full liquids sooner than day 4. Slowly introduce full liquids with your clear liquids.

Protein Goal: 60 to 80 grams per day

Carbohydrate Goal: 60 to 80 grams per day

Fluid Goal: 60 to 80 ounces of clear liquids per day

- Sip, sip, sip!
- 1 ounce every 10-minutes or 1/2 ounce every 5-minutes.
- Add one serving of Miralax into a glass of water daily.
- Avoid gulping fluids.
- No straws.
- Full liquid protein supplements can count towards half of your clear liquid goals.

Full Liquid Examples:

- Protein shakes/powders (see page 26)
- Skim milk
- 100% vegetable juices
- Strained or pureed light cream soups (no cream of potato)
 - Low-fat cream of chicken, low-fat cream of mushroom
- Sugar-free hot cocoa mix
- Carnation Instant Breakfast® Light Start

Full Liquids Sample Day:

8 oz. high-protein, low-sugar clear liquid protein drink	20 gm
12 oz. water + Miralax	0 gm
4 oz. 100% vegetable juice	0 gm
8 oz. high-protein, low-sugar liquid protein drink	20 gm
12 oz. 50% diet fruit juice + 50% water	0 gm
8 oz. high-protein chicken soup	20 gm
12 oz. water	0 gm
64 Total ounces Liquid	60 grams Total Protein

Pureed Foods: Days 15-21



Pureed Foods: Days 15 -21

The pureed food diet allows you to start introducing foods that are easily tolerated and provide adequate nutrition for healing. Your suture line from surgery is continuing to heal and using pureed foods allows you to not add any additional stress during this process.

- ❖ This diet consists of foods that are easy to swallow because they are blended or pureed until they are a “pudding-like” texture.
- ❖ These foods should not contain any lumps or chunks.
- ❖ Use water, milk, or broth to achieve pureed consistency.
- ❖ Introduce only one new food at a time.
 - If a food is not tolerated wait 1-2 weeks before trying again.

Protein Goal: 60-80 grams per day

- Supplement with protein drinks in between meals to meet goal.

Carbohydrate Goal: 60 to 80 grams per day

- Carbohydrate examples: applesauce, grits, cream of wheat, oatmeal, bananas, low fat/low sugar blended yogurt, sugar free pudding, fat free refried beans
- Shakes containing carbohydrates: Ensure High Protein, Boost Glucose Control, Glucerna Hunger Smart, Equate High Protein Nutritional Shake, GNC Total Lean Shakes, among others.
- Powders containing carbohydrates: Bariatric Advantage High Protein Meal Replacement, Bariatric Fusion High Protein Meal Replacement, Celebrate Meal Replacement Shakes, to name a few.

Fluid Goal: 60 to 80 ounces of clear liquids per day

- No drinking liquids during or 30 minutes after meals.
- Add one serving of Miralax into a glass of water daily.
- Avoid gulping fluids.
- No straws.
- Full liquid protein supplements can count towards half of your clear liquid goals.

Meal Size and Timing:

- Focus on eating three small meals per day.
- Meals should be no larger than 4 ounces or 1/2 cup.
 - Do not expect to eat a full meal.
- Avoid snacking between meals.
- Focus on mindful eating: stop when you feel satisfied or comfortable, avoid getting full.
- Use a small plate and fork/spoon.

- Eat slowly—one small bite at a time and put down fork/spoon between each bite.
- Meals should take 20-30 minutes.

Pureed Food Examples:

- Pureed soups
- Low-fat, low-sugar blended yogurt (no fruit chunks)
- Sugar-free puddings
- Applesauce (no added sugar) with protein powder
- Cream of wheat, oatmeal, or grits with protein powder
- Fat-free refried beans, pureed

Pureed Foods Sample Days

Day 1:

4 oz. cream of wheat + unflavored protein powder	21 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. non-fat Greek yogurt	10 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
8 oz. water	0 gm
4 oz. low-fat cream of chicken soup + unflavored protein powder	20 gm
8 oz. water	0 gm
64 Total ounces Liquid	71 grams Total Protein

Day 2:

4 oz. pureed cottage cheese	13 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. applesauce + unflavored protein powder	20 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
3 oz. pureed fat-free refried beans + laughing cow wedge	7 gm
12 oz. water	0 gm
64 Total ounces Liquid	60 grams Total Protein

Day 3:

4 oz. oatmeal + unflavored protein powder	21 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm

12 oz. water	0 gm
4 oz. sugar-free pudding + unflavored protein powder	20 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. high-protein cream of mushroom soup	15 gm
8 oz. water	0 gm
68 Total ounces Liquid	75 grams Total Protein

Day 4:

4 oz. non-fat greek yogurt	10 gm
16 oz. water + Miralax	0 gm
8 oz. high-protein, low-sugar liquid protein drink	20 gm
12 oz. water	0 gm
3 oz. pureed fat-free refried beans + laughing cow wedge	7 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. high-protein tomato soup	15 gm
8 oz. water	0 gm
64 Total ounces Liquid	62 grams Total Protein

Day 5:

4 oz. grits + unflavored protein powder	21 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. applesauce + unflavored protein powder	20 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. pureed cottage cheese	13 gm
8 oz. water	0 gm
68 Total ounces Liquid	74 grams Total Protein

Soft Foods: Weeks 3-7 (Day 22 onward)



Soft Foods: Weeks 3-7(day 22 through Week 7)

The soft food diet allows you to transition to soft, semi-solid protein sources that continue to be easily tolerated while your suture lines heal.

- ❖ This diet consists of foods that are soft and easy to chew and swallow.
 - These foods should not be hard, sticky, or crunchy.
- ❖ All foods must be soft, moist, and tender; and diced, ground, pureed, and/or chopped into small pieces.
- ❖ Wait until week 7 or 8 to introduce denser meats such as steak, ground beef, turkey and pork, as well as salmon fillets and chicken (except canned chicken in water).
- ❖ Once comfortable with protein foods, introduce vegetables and fruits.
 - Choose vegetables that are well cooked, soft, and moist.
 - No raw or fibrous vegetables until after week 6.
 - Avoid fruits with skins, seeds, or membranes that could “get stuck” until after week 6.

Protein Goal: 60-80 grams per day

- Supplement with protein drinks in between meals to meet goal.

Carbohydrate Goal: less than 60 to 80 grams per day

Fluid Goal: 60 to 80 ounces of clear liquids per day

- No drinking liquids during or 30 minutes after meals.
- Add one serving of Miralax into a glass of water daily.
- Avoid gulping fluids.
- No straws.
- Full liquid protein supplements can count towards half of your clear liquid goals.

Meal Size and Timing:

- Chew, chew, chew!
- Focus on eating three small meals per day.
- Meals should be no larger than 4 ounces or 1/2 cup.
 - Do not expect to eat a full meal.
- Avoid snacking between meals.
- Focus on mindful eating: stop when you feel satisfied or comfortable, avoid getting full.
- Use a small plate and fork/spoon.
- Eat slowly—one small bite at a time, chew each bite 20-30 times, and put down fork/spoon between each bite.
- Meals should take 20-30 minutes.

- Avoid bread, rice, pasta, and tortillas for the first year.

Soft Food Examples:

- Soft scrambled eggs, egg beaters, or hard boiled eggs
- Cottage Cheese
- **Canned** tuna, chicken, salmon (packed in water, not oil)
 - Add fat-free mayo, mustard, lemon juice, or broth to moisten
- Mild flaky fish (haddock, flounder, tilapia)
- Canned soft vegetables (green beans, carrots, sweet potatoes)
- Soft, tender cooked vegetables (without peels or seeds)
- Canned soft fruit (no sugar added)
- "Mushy" peeled fruits (bananas, applesauce)
- Low-fat soft cheese (laughing cow wedge, ricotta cheese)
- Hummus
- Beans
- Tofu

Soft Foods Sample Days:

Day 1:

1 scrambled egg	6 gm
16 oz. water + Miralax	0 gm
8 oz. high-protein, low-sugar liquid protein drink	20 gm
12 oz. water	0 gm
4 oz. cottage cheese	13 gm
8 oz. water	0 gm
8 oz. high-protein, low-sugar liquid protein drink	20 gm
12 oz. water	0 gm
3 oz. tuna fish with fat-free mayo	16 gm
8 oz. water	0 gm
72 Total ounces Liquid	75 grams Total Protein

Day 2:

1 small banana + 2 tbsp powdered peanut butter	5 gm
16 oz. water + Miralax	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
4 oz. canned chicken with dijon mustard	24 gm
12 oz. water	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
12 oz. water	0 gm
3 oz. flaky white fish + 1 oz. cooked green beans	22 gm
12 oz. water	0 gm
68 Total ounces Liquid	71 grams Total Protein

Regular Solid Food: Weeks 7 - Lifelong



Regular Solid Food: Week 7 – Lifelong

At this time your surgery site has healed you are ready to begin using your new “tool” to help you succeed with weight loss. You have worked hard to get to this stage of your new dietary plan; you can have quality nutritious foods but only in small amounts. Remember that bariatric surgery works by primarily reducing the amount of food you can eat at a time.

- ❖ Start using the 3-2-1 Rule: **Three bites of protein, two bites of non-starchy vegetables, and one bite of complex carbohydrates.**
- ❖ Introduce only one new food at a time.
 - If a food is not tolerated wait 1-2 weeks before trying again.
- ❖ Begin to introduce denser meats such as chicken breast, lean beef, lean pork, turkey breast, and ham.
- ❖ Slowly add in small portions of raw or fibrous vegetables and fruits with skins, seeds, and membranes.
- ❖ Avoid bread, rice, pasta, and tortillas for the first year after surgery.

Protein Goal: 60 to 80 grams per day

- At least half of your meal should be protein.
- Focus on higher sources of protein found in meats, dairy products, and beans.
- Do not rely on protein shakes/powders; use them only as needed to meet your protein requirements.

Carbohydrate Goal: less than 60 grams per day

Fluid Goal: 60 to 80 ounces of clear liquids per day

- No drinking liquids during or 30 minutes after meals.
- Continue one serving of Miralax in a glass of water daily, as needed.
- Avoid gulping fluids.
- No straws.

Meal Size and Timing:

- Chew, chew, chew!
- Focus on eating three small meals per day.
- Eat protein first, followed by vegetables, then complex carbohydrates.
- Never exceed 15 grams of sugar per meal to avoid dumping syndrome.
- Meals should be no larger than 4 ounces or 1/2 cup.

- Meals should be no more than 4 1/2 hours apart.
- Avoid snacking between meals.
- Focus on mindful eating: stop when you feel satisfied or comfortable, avoid getting full.
- Use a small plate and fork/spoon.
- Eat slowly—one small bite at a time, chew each bite 20-30 times, and put down fork/spoon between each bite.
- Meals should take 20-30 minutes.

Regular Solid Food Sample Days:

Day 1:

2 scrambled eggs with ¼ cup cooked spinach + ½ banana	17 gm
24 oz. water + Miralax (as needed)	0 gm
8 oz. Fairlife® fat-free ultra filtered milk	13 gm
3 oz. chicken breast + 1 oz. green beans	21 gm
24 oz. water	0 gm
3 oz. salmon + ¼ sweet potato with butter spray	19 gm
16 oz. water	0 gm
72 Total ounces Liquid	70 grams Total Protein

Day 2:

3 oz. high-protein oatmeal + ½ apple + 2 tbsp powdered peanut butter	15 gm
24 oz. water + Miralax (as needed)	0 gm
4 oz. high-protein, low-sugar liquid protein drink	10 gm
2 oz. sliced turkey + 1 oz. cottage cheese + sliced tomatoes	20 gm
24 oz. water	0 gm
3 oz. chicken thigh + 1 oz. sautéed onions and bell pepper	21 gm
16 oz. water	0 gm
68 Total ounces Liquid	66 grams Total Protein

Day 3:

2 hard boiled egg	12 gm
24 oz. water + Miralax (as needed)	0 gm
8 oz. Fairlife® fat-free ultra filtered milk	13 gm
4 oz. high-protein cream of broccoli soup	15 gm
24 oz. water	0 gm
3 oz. baked swordfish + 1 oz. artichoke hearts	21 gm
16 oz. water	0 gm
72 Total ounces Liquid	61 grams Total Protein

Day 4:

8 oz. high-protein, low-sugar liquid protein drink	20 gm
24 oz. water + Miralax (as needed)	0 gm
4 oz. Fairlife® fat-free ultra filtered milk	6 gm
3 oz. grilled chicken + 1 oz. lettuce + non-fat dressing	21 gm
24 oz. water	0 gm
4 oz. tofu and mixed vegetable stir-fry	15 gm
16 oz. water	0 gm
76 Total ounces Liquid	62 grams Total Protein

Day 5:

8 oz. non-sugar carnation instant breakfast mixed with Fairlife® fat-free ultra filtered milk	18 gm
24 oz. water + Miralax (as needed)	0 gm
3 oz. grilled chicken + 1 oz. lettuce + non-fat dressing	21 gm
24 oz. water	0 gm
3 oz. pork tenderloin + 1 oz. zucchini	21 gm
16 oz. water	0 gm
72 Total ounces Liquid	60 grams Total Protein

Lifelong Diet: Successful Eating Plan



Successful Eating Plan: The 3-2-1 Rule

After bariatric surgery, follow this simple rule: **Three bites of protein, two bites of non-starchy vegetables, and one bite of complex carbohydrates.**

A successful eating plan post-surgery will help to ensure adequate weight loss and weight management long-term. The following pages provide you with some easy to follow information when planning your meals and outline examples of foods that fit into each group.

Meal Planning Tips:

- ❖ Protein comes first at meals, followed by vegetables and fruits, and last complex carbohydrates.
- ❖ Meal sizes should not exceed ½ cup or 4 oz. for at least the first 6 to 9 months.
 - Use a measuring cup and/or scale for accuracy.
 - As you are able to tolerate more food the increased intake should come from vegetables and fruits, not larger portions of protein or simple carbohydrates.
- ❖ Meals should be no more than 4 1/2 hours apart.
- ❖ Avoid snacking. If you are physically hungry between meals focus on high protein snacks or non-starchy vegetables.
- ❖ Eat slowly—one small bite at a time, chew each bite 20-30 times, and put down fork/spoon between each bite.
- ❖ Meals should take 20-30 minutes.
- ❖ Track daily food intake using a food journal (see page 60) or digital application/website to better understand your protein and caloric intake.
 - Patients who use a food journal lose more weight.



First: Eat High Protein Foods

Food Name	Portion	Calories	Protein (grams)
Chicken – Breast, no skin	3 oz	138	26
Chicken – Leg, no skin	3 oz	162	21
Turkey – Breast, no skin	3 oz	105	21
Beef - Eye of Round	3 oz	143	21
Beef - Top Loin	3 oz	176	21
Beef - Sirloin Trimmed	3 oz	166	26
Hamburger - 90% Lean	3 oz	169	21
Veal - Loin	3 oz	149	21
Veal - Leg - Top Round	3 oz	128	21
Ham - Lean 5% Fat	3 oz	133	21
Pork Tenderloin	3 oz	139	21
Pork Loin – Chop	3 oz	172	21
Lobster – steamed	3 oz	77	16
Crab – steamed	3 oz	82	17
Shrimp – steamed	3 oz	84	18
Cod – baked	3 oz	89	21
Flounder – baked	3 oz	62	21
Halibut – baked	3 oz	119	21
Salmon – baked	3 oz	155	21
Tuna - canned water packed	3 oz	111	25
Swordfish - baked	3 oz	132	21
Cheese - American Fat Free	1 oz	40	6
Cheese - Cottage 1% Fat	½ cup	82	14
Cheese - Parmesan Grated	¼ cup	128	12
Cheese-Mozzarella Part Skim	1 oz	78	8
Cheese - Ricotta Part Skim	½ cup	170	14
Egg - Hard Cooked	1	78	6
Tempeh	½ cup	165	16
Texturized Soy Protein	½ cup	59	11
Tofu	½ cup	94	10
Seitan	3 oz	100	21

First: Eat High Protein Foods

These foods contain protein and healthy carbohydrates:

<u>Dairy</u>	<u>Beans</u>	<u>Beans</u>
Skim milk	Baked beans	Adzuki beans
Fairlife® fat-free milk	Garbanzo beans	Black beans
Soy milk	Navy beans	Black eyed peas
Greek yogurt	Lima beans	Cannellini beans
Cottage cheese	Soy beans	Kidney beans
Ricotta cheese	Pinto beans	Fava beans
	Split peas	
	Yellow split beans	
	Lentils	
	Lima beans	
	Butter beans	

Second: Eat Non-Starchy Vegetables

<u>Non-Starchy Vegetables</u>	<u>Non-Starchy Vegetables</u>
Artichoke	Lemongrass
Arugula	Lettuce
Asparagus	Mung beans
Avocado	Mushrooms
Bell pepper	Napa cabbage
Bok choy	Okra
Broccoli	Onion
Broccolini	Radicchio
Brussel sprouts	Radish
Cabbage	Rutabaga
Cauliflower	Shallot
Celery	Snap peas
Chicory	Snow peas
Chives	Soybeans
Collard Greens	Spinach
Cucumber	Summer squash
Eggplant	Swiss chard
Endive	Taro
Garlic	Tomatillo
Ginger	Tomato
Green beans	Turnip
Jicama	Water chestnut
Kale	Watercress
Leeks	Zucchini

Third: Eat **Complex Carbohydrates** from Fruits and Starchy Vegetables

Fruits	Fruits	Starchy Vegetables
Apple	Lychee	Acorn squash
Apricot	Mandarin	Beets
Banana	Mango	Butternut squash
Berries	Melon	Corn
Blackberry	Nectarine	Carrots
Blood orange	Orange	Parsnips
Blueberry	Papaya	Peas
Cantaloupe	Passion fruit	Pumpkin
Cherry	Peach	Spaghetti Squash
Clementine	Pear	Sweet potato
Coconut	Persimmon	Yam
Cranberry	Pineapple	
Currant	Plantain	
Date	Plum	
Dragon fruit	Pluot	
Fig	Pomegranate	
Grape	Pomelo	
Grapefruit	Raspberry	
Guava	Star fruit	
Jackfruit	Strawberry	
Kiwi	Tamarind	
Kumquat	Tangerine	
Loquat	Watermelon	

Third: Eat Complex Carbohydrates from **Whole Grains**

First year: these whole grains are generally well tolerated; YET Use caution as these can slow weight loss in some people.

<u>Grains</u>	<u>Cereal</u>
Quinoa	All Bran
Bulgur	Buckwheat Oats
Barley	Muesli
Buckwheat Kasha	Oat Bran
Farro	Steel Cut Oats
Wasa Whole Grain crispbread	
Kashi Original 7 Grain Crackers	
Kavli Crispbread thins	

After first year: while some people add these **whole grains back, go slow! And use caution as these can slow progress or worse, contribute to weight gain in some people.**

<u>Grains</u>	<u>Breads</u>
Brown Rice	Arnold Sandwich thins
Wild Rice	Flatout breads
Whole wheat pasta	La Tortilla Factory Low Carb whole wheat tortillas
Couscous	Sara Lee 45 Calories & Delightful 100% whole wheat bread
	Pepperridge Farm Light Style whole wheat bread

Exercise After Bariatric Surgery



Exercise After Bariatric Surgery

Incorporating physical activity is very important after bariatric surgery and can influence your success.

Before starting exercise post-surgery

- ❖ If you have a history of heart disease, hypertension, diabetes, high cholesterol, or other risk factors for heart disease, check with your doctor before starting an exercise program.
- ❖ Stop exercising immediately and contact your doctor if you experience chest pain or severe shortness of breath with exercise.
- ❖ Begin each formal exercise session with a 5- to 10-minute warm-up and end with a 5- to 10-minute cool-down.
 - This allows your muscle, heart, and lungs to adapt gradually to the increasing and decreasing energy demands of exercise.
- ❖ Increase frequency, intensity, and duration of exercise slowly over the course of weeks.
- ❖ Start with walking. Begin by walking five minutes a day and try to increase the time you walk each day until you are walking 20 to 30 minutes a day.
- ❖ Have fun while exercising! Most important thing is you take one more step a day than you normally take. That you move more each day. When that one more thing is routine, then add to your activity.

Benefits of Exercise

- ❖ Burns calories
- ❖ Helps control appetite
- ❖ Preserves lean body mass
- ❖ Increases metabolic rate
- ❖ Improves sense of well-being
- ❖ It is the best predictor for long-term success

Exercise Goals

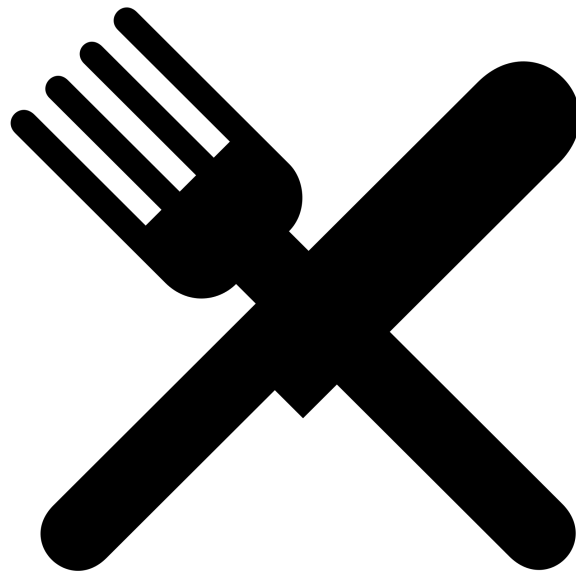
- ❖ 150 minutes a week (30 minutes, 5 days/week) has been shown to be effective for weight maintenance.
- ❖ 300 minutes a week (60 minutes, 5 days/week) has been shown to be effective for weight loss.
- ❖ Incorporate strength training 2 to 3 days/week.
 - This is important for preserving lean body mass and maintaining and/or increasing your metabolic rate.
- ❖ Both continuous and intermittent exercises have been proven effective to achieve goals.

Habits for Successful Weight Loss and Maintenance

Habits for Successful Weight Loss and Maintenance

- Adherence to scheduled visits.
- Compliance with nutrition recommendations.
- Maintenance of regular physical activity (150 minutes of moderate or higher intensity physical activity per week).
- Participation in support groups.
- Maintenance of food records and weight monitoring records.
- Adequate sleep and stress management.
- Nonfood strategies to cope with emotions and stress.
- Mindful eating:
 - Eating slowly.
 - Focusing on the eating experience, without distraction.
 - Paying attention to hunger and fullness.
- Meal planning.
- Choosing nutrient-dense whole foods instead of soft, high-calorie foods.
- Not drinking large amounts of fluids with or immediately after meals.

Possible Side Effects After Bariatric Surgery



Possible Side Effects After Bariatric Surgery

Dehydration

After surgery, both the amount and the rate of fluid you are able to drink are significantly reduced. This places you at a higher risk of developing dehydration and also makes it more difficult to treat. Dehydration is the main cause of fatigue and nausea and is also the most common reason for re-admission to the hospital. You may need IV fluid replacement if you do become significantly dehydrated. Therefore, it is extremely important to prevent dehydration by getting in 64 ounces of fluid per day. Do not take this lightly, it can be serious. Symptoms of dehydration include fatigue, nausea, weakness, dark colored urine, dizziness, and dry mouth. Dehydration can further lead to bladder and kidney infection.

Nausea

Dehydration is the most common reason for nausea. Other causes include insufficient chewing, fullness, sensitivity to odors, pain medication, not eating, and post-nasal drip. Concentrate on gradually increasing fluid intake to avoid nausea. Medications will be provided to help with nausea after surgery.

Vomiting

Vomiting is associated with eating meals too fast, overeating, eating dry food, advancing your diet too quick, drinking water with a straw, lying down after a meal, not chewing food properly, and drinking liquids with or right after your meals. If vomiting continues throughout the day, stop eating solid foods and sip clear liquids. Advance your diet slowly following the guidelines for diet advancement after bariatric surgery.

Ketosis

Ketosis is the metabolic process where the body burns fat for fuel. Small amounts of ketones in the blood stream usually do not cause issues; it can actually make you feel less hungry and has been shown to help maintain muscle mass while losing weight. When ketones in the blood stream become larger, it can cause side effects like thirst, fruity-smelling breath, nausea, vomiting, confusion, fatigue, and headaches. To reverse or prevent ketosis aim for 60 to 80 grams of carbohydrates per day using the healthy carbohydrates recommended in your diet stage.

Food Blockage

Food blockages occur when you have not chewed your food to the consistency of applesauce. Most of the time, the food will soften and works its way through by itself. If you have a food blockage, you will feel pressure and this will be uncomfortable. It is not recommended that you drink large volumes of fluids. If you have a food blockage, a few small sips of warm water can help sooth tissues and loosen the food. A food blockage can cause vomiting.

Constipation

The most common cause of constipation is not drinking enough fluids. After surgery the amount of food consumed is greatly decreased, as is the amount of fiber. Pain medications, as well as supplements containing iron, can also affect bowel function. The number of bowel movements will decrease, causing less frequent bowel activity, which can result in constipation. Constipation can be treated by increasing fluid intake, increasing dietary fiber through foods or a supplement, and increasing activity. We encourage the use of Miralax daily in your early post-operative phases to help prevent constipation. Stool softeners or mild laxatives may also be used on occasion if needed.

Diarrhea

Some patients experience more watery stools the first few weeks after surgery as the bowels adjust to the new changes. Diarrhea can also be a sign of dumping syndrome from eating foods with a high sugar or fat content.

Flatulence

Flatulence or gas can be common post-surgery. Sipping fluids through a straw and chewing gum can cause gas due to gulping and swallowing air. Beans, vegetables, some fruits, soft drinks, whole grains, wheat, bran, milk, soft cheese, and foods containing sorbitol can also cause gas. Gas-X, Beano, or Mylicon can be used to prevent or manage gas. Eating meals more slowly and chewing food thoroughly can also prevent gas.

Body Odors

Bad breath after surgery is a common side effect caused by ketosis. Additionally, many people complain of unpleasant odor of stools and gas. This is caused from food being exposed to the bacteria in the intestines in a less digested state. As the volume of food you can eat increases and your weight loss slows bad breath and unpleasant odor of stools and gas usually subside.

Lactose Intolerance

Some individuals can experience lactose intolerance post-surgery, even if they were not before surgery. Lactose intolerance can cause flatulence, cramps, and diarrhea. Lactose intolerance can be treated with Lactaid, a pill to help your body digest lactose, or by avoiding lactose containing products.

Hair Loss

Hair loss is expected when experiencing rapid weight loss. Causes of hair loss include dehydration and inadequate protein and vitamin/mineral intake. Hair loss is temporary and resolves itself when your nutrition and weight stabilize. Hair loss usually occurs 3 to 9 months after surgery or after 70 to 80 pounds of weight loss. Nioxin shampoo and biotin supplements have been helpful for some patients. Protein, vitamins/minerals, and water intake are important for healthy hair.

Skin

After surgery it is not uncommon to have dry skin or acne. Loose skin occurs with rapid weight loss and compression type garments have been helpful for many patients. Patients may have a "drawn" or wrinkled look to their face but this will normalize in most cases. Protein, vitamins/minerals, and water intake are important for healthy skin.

Ulcers

In order to help prevent stomach ulcers we recommend avoiding anti-inflammatory medications (NSAID's) that can irritate the stomach. Avoid aspirin, ibuprofen, Motrin, Advil, Naprosyn, Aleve, and any other NSAID's. Tylenol or acetaminophen may be used for pain relief. Excess caffeine, alcohol intake, or nicotine/tobacco use can also lead to ulcers.

Vitamin and Mineral Deficiency

Bariatric surgery alters the way your body processes the food you eat. This leads to decreased absorption of certain nutrients, vitamins, and minerals. Also, due to the reduced amount of food taken in post-surgery, your diet is inadequate to supply complete nutrition. In order to meet your vitamin and mineral needs post-surgery, nutritional supplements including a multivitamin/mineral, calcium citrate, and vitamin B12 must be taken for life. Vitamin and mineral deficiencies are tested for as part of your long-term follow-up after surgery. If deficiencies are found additional vitamins/minerals may be required.

Protein Deficiency

Protein is an essential nutrient that helps your body grow and repair itself. Protein helps build muscles, fight infection, and heal wounds. After bariatric surgery it is important that you meet your protein goals to make sure that the body gets enough for repair and maintenance. If protein is eaten at every meal during the first half of the meal, deficiency is less likely to occur.

Reactive Hypoglycemia

Reactive hypoglycemia results from a low blood sugar. It usually occurs within 45 to 60 minutes after eating a meal that is high in carbohydrates, missing a meal, or going too long without eating. Symptoms include sweats, rapid heart rate, lightheadedness, confusion, and inability to focus. Reactive hypoglycemia can be prevented by eating three well-balanced meals per day that include protein, vegetables/fruits, and whole grains. If you are unable to eat a meal, drink a protein shake to avoid skipping the meal entirely. Checking your blood sugar is a good way to determine if it is reactive hypoglycemia versus dumping syndrome.

Dumping Syndrome

Dumping syndrome occurs when food passes rapidly from the stomach into the small intestine. The partially digested food in the small intestine draws water out of the blood vessels from the body into the small intestine. Symptoms include nausea, faintness, fullness, abdominal cramping, weakness, paleness, sweating, rapid heart rate, bloating, vomiting, jitters, and/or diarrhea. Symptoms occur about 10 to 30 minutes after eating. Late dumping can occur 2 to 3 hours after a meal.

Dumping syndrome is usually provoked by the ingestion of concentrated sweets, refined carbohydrates, overeating, drinking liquids with meals, and food high in fat. Reading food labels can help determine if a food has too high of a sugar content. Never exceed 15 grams of sugar per meal to avoid dumping syndrome. The following are different forms or names of sugar that may be seen in the ingredient list of foods:

- Sucrose
 - Agave
 - Dextrose
 - Glucose
 - High Fructose Corn Syrup
 - Fructose and lactose are the natural sugars found in fruits and dairy products.
 - Honey
 - Maple Syrup
 - Sorghum
 - Sorbitol
 - Mannitol
- While both of these sugars are generally better tolerated after surgery they still should be consumed in moderation.

Foods that May Cause Dumping Syndrome

Beverages

- Alcohol
- Milkshakes
- Cocoa
- Sport Drinks
- Sweetened Drink Mixes
- Flavored Milks
- Sweetened Coffee
- Fruit Juices
- Carbonated Beverages
- Sweet Tea

Desserts & Sweets

- Cakes
- Candy
- Cookies
- Marshmallows
- Pies
- Gelato
- Pastries
- Sugar
- Chocolate
- Syrups
- Gelatin (regular)
- Molasses
- Ice Cream
- Honey
- Ice Milk
- Jelly
- Frozen Yogurt
- Jam
- Italian Ice
- Yogurt (regular)
- Popsicles

Fruits

- Fruits in heavy or light syrup
- Fruit juice

Breads & Cereals

- Pastries
- Doughnuts
- Muffins
- Sweet rolls
- Breads with frostings or glazes
- Sugar-coated cereals

Meats & Mixed Meat Dishes

- Fast Food
- Chinese Food
- Fried Foods
- Baked Beans
- Honey-Baked Ham

Vegetables

- Any with added sugar
- Candied Sweet Potatoes
- Candied Carrots

Condiments

- Regular Mayonnaise
- Butter
- Regular Salad Dressings
- Excess Oil (olive, canola, coconut, etc.)

Additional Considerations After Bariatric Surgery

Pregnancy

Obesity is one of the most common causes of infertility in the U.S. Fertility may significantly increase after bariatric surgery. If you are hoping to become pregnant, be sure to discuss pregnancy with your physician before surgery. In general, you should wait at least 18-24 months after surgery before getting pregnant.

Alcohol Use

It is recommended you avoid alcohol intake until at least one year after surgery. After one year you will be able to drink alcohol but plan on less frequent and smaller portions. Alcohol is high in calories and it can lead to a decrease in inhibitions. Post-surgery alcohol absorbs into your bloodstream at a much faster rate. The effects of alcohol are amplified and you could become intoxicated or even incapacitated in a shorter period of time. It also takes longer to eliminate alcohol from your system. Alcohol consumption after surgery may also increase the risk of ulcer formation.

Transfer Behaviors or Addictions

Many people use foods to satisfy their emotional needs. After bariatric surgery, this will no longer be possible. Be careful not to engage in other addictive behaviors. Transfer behaviors or addictions seen post-surgery include but are not limited to: alcohol abuse, excessive shopping, excessive gambling, and promiscuous sexual behavior. If you notice a transfer behavior or addiction begin it is important to seek help from a behavior counselor.

When to Seek Behavioral Health Services

Although research indicates that problems such as depression and self-esteem can get better after bariatric surgery, at least for a while, these issues can rearise if not dealt with and can undermine your ability to stay on your bariatric plan, and can contribute to weight regain. Below is a list of some issues that may arise for which seeking behavioral health services - which may include psychotherapy and/or medication services - is strongly advised:

- ❖ New or resumed clinical depression symptoms (*persistently depressed or irritable mood; loss of interest or pleasure in previously enjoyed activities; poor sleep or excessive sleeping; decreased self-esteem; difficulties making decisions or concentrating; negative or hopeless outlook on the future; and/or thoughts of self-harm or suicide*): See your PCP or a psychiatrist to consider antidepressant medication, and also consider seeking psychotherapy services to help you adjust to the stressful life changes that can occur after weight loss.
- ❖ New or resumed binge eating or emotional eating behaviors (*i.e. eating in response to stress, anxiety, sad mood, boredom, etc.*): Consider psychotherapy services with a therapist knowledgeable about eating disorders and/or behavior modification. These behaviors after surgery are predictors of a poor long-term outcome if not addressed.
- ❖ Problematic changes in personal relationships (*e.g. marriage conflicts, loss of previous friends, criticism from others about having undergone weight loss surgery, etc.*): Consider seeking supportive psychotherapy and/or marital counseling to help you to adjust to any problem relationship issues that may arise.
- ❖ Increased use of alcohol or other addictive substances. Be aware that your body will not metabolize alcohol in the same way and that it is much easier to become intoxicated, which could lead to some individuals developing an alcohol use disorder. Consider seeking substance abuse counseling.
- ❖ History of sexual abuse/assault in childhood or adulthood. Sometimes people with a history of sexual abuse can become very anxious or distressed in response to the increased attention they may receive after a significant weight loss, and can engage

- in behaviors that could undermine their bariatric success. Consider seeking psychotherapy services with a therapist skilled in trauma resolution services.
- ❖ “I’ve lost 100 pounds but I still see the old me in the mirror...” In this case your self-image and body-image have not changed despite the objective change in your body and shape. Consider seeing a therapist for self-esteem and body-image issues.
 - ❖ “I thought life was supposed to get better and people would treat me better...” You may have had unrealistic expectations or reasons for doing surgery that can lead to disappointment and failing to follow the program. See a therapist to work on improving your self-esteem and the other areas of your life that weight loss alone cannot fix.
 - ❖ While anxiety and panic attacks are less likely to derail a bariatric plan, addressing these issues can be important to your success.

Keeping a Food & Activity Journal

Getting the Most Out of Your Food Journal

Using a food journal is a great way to learn about your eating habits. It allows you explore what you eat, how much you eat, when you eat, and how you feel when you eat. No matter the method you use, the simple act of writing down what you eat throughout the day provides you with more self-awareness and accountability to what is going in your mouth. Studies have also shown individuals who track their food intake lose 50% more weight than those who do not. The following tips are ways to get the most out of your food journal and learn about your eating habits.

Choose the method that will work best for you.

- ❖ Whether it is using the pen and paper method, an electronic phone application (app), or a website to track you need to choose the option that is easiest for you to use.
- ❖ When choosing an app check out some of the top rated tracking apps or give them a trial run, pick the one that is most appealing to you.
- ❖ The method you choose needs to work for you and your lifestyle.

Track food and beverages as you eat them.

- ❖ It can be hard to go back at the end of the day and remember what you ate and estimate portions. Tracking your food and beverage intake as you go throughout the day will allow more accuracy in your tracking and bring awareness to those small nibbles you might have throughout the day.

Use measuring devices for accuracy with portions.

- ❖ For accuracy with tracking calories, it is important to understand what a portion size looks like. Obviously, you are not going to walk around with a food scale or measuring cup, so you will have to learn to “eyeball” it.
- ❖ Use a food scale and measuring cups at home so you become familiar with what portion sizes look like.

Track the times you eat.

- ❖ Bringing awareness to the times you eat is your first step to understanding patterns, meal spacing, and identifying challenging time frames. If lunch is at noon and dinner isn't until 7pm, that's a 7-hour stretch without fuel.
- ❖ Long periods without food can lead to overeating at the next meal.
- ❖ Write down the times you eat your meals and snacks and identify patterns that could use improvement.

Track your emotions.

- ❖ Tracking your feelings/mood can also help you recognize patterns. Identifying food habits surrounding emotions will allow you to correct the pattern and start a new, healthier habit.

Track physical activity.

- ❖ Many apps and websites also have an area to track exercise, which is a great way to ensure you are getting in regular physical activity.
- ❖ The biggest caution is that many of these apps and websites also give you additional calories when you track exercise. Incorporating physical activity can increase your weight loss momentum and help maintain muscle mass; it should not be used as a reason to eat more calories, which can slow weight loss.

Vow to be honest with yourself.

- ❖ If you aren't being honest with your food journals, the only person you are hurting is yourself.
- ❖ It can be tempting to only write down the good stuff, but writing down even those small nibbles and the items you aren't thrilled about provides you with self-accountability.

Free Tracking Applications and Websites:

- Baritastic
- MyFitnessPal
- LoseIt
- MyPlate Calorie Tracker

Today's Day and Date: _____ Diet Stage: _____

Time:	Food or Beverage:	Amount: (cups or ounces)	Protein: (grams)	Carbs: (grams)	Calories:
Totals:					

Did you exercise: Yes No Type: _____ Duration: _____

Fluids: check one box for every 8 oz consumed

Vitamins taken:

- Multivitamin (200% of daily value)
- Calcium Citrate (1200-1500 mg/day – split in 3 doses)
- B12 (under tongue)
- Iron (if needed)

Notes: _____

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Today's Day and Date: _____ Diet Stage: _____

Time:	Food or Beverage:	Amount: (cups or ounces)	Protein: (grams)	Carbs: (grams)	Calories:
Totals:					

Did you exercise: Yes No Type: _____ Duration: _____

Fluids: check one box for every 8 oz consumed

Vitamins taken:

- Multivitamin (200% of daily value)
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